LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

FOR OFFICE USE ONLY Postmark Date: 12/01/04 Ren. 2005 UB 032418

1041401

Instructions

• Print in ink or type.

NAME

Kirknatrick.

- Complete form and return with \$1.10 registration fee to the Board of Ethics, 24.15 Qual Dr., 3rd Floor, Baton Rouge, LA 70803, (225) 763-8777 or (800) \$42-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a
 lobbyist or (2) first action requiring registration. Registrations expire as of
 December 31 unless a renewal is submitted between December 1 and January

Last	First	77	Ml	10414
2. BUSINESSPRONE	(225) 922-5110	70		L
	Area Code and Phons No	omber		
3. BUSINESS ADDRESS	4041 Bssen Lane, St		ouge, LA 70809	
200 8	Street and No.	City	State	Zip
MAILING ADDRESS	same as above		_	
	Street and No.	City	State	Zfp
4, PAMPLOYER Long	Law Firm	<u> </u>	<u> </u>	
5. EMPLOYER'S ADDRES	s same as above			
	Street and No.	City	State	Ziρ
6. LIST BELOW (a) Names	of newords, ecoups, or other	izations which your	coresent; (b) the add	ress of each such o

C.

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

Kris

1. Name Louisiana Hydroelectric Limited Partnership

Address 409 Texas Street, Vidalia, LA 71373

Business or purpose Power Generation

Does this person pay you? Yes

If No, who pays you?

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Name	Waste Management of Louisiana, L.L.C.
Address_	c/o Waste Management of New Orleans Residential Operations, 15140 Intracoastal Drive, New Orleans, LA 70129
Business or	purpose Waste Disposal
Does this p	erson pay you? yes
If No, who	pays you?
Name	Progress Energy
Address_	P. O. Box 1551, PEB Suite 1505, Raleigh, NC 27602
Business o	r purpose Oil and Oas Production
Does this p	person pay you? <u>yes</u>
If No, who	pays you?
Name	
Address_	
Bosiness	or purpose
Docs this	person pay you?
If No, wh	o pays you?

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

ATTACH 2" x 2" PHOTOGRAPH HERE

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